SUBMIT: <u>COMPLETED</u> APPLICATION, TAX STATEMENT AND FEE TO: **Bayfield County** Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

Authorized Agent:

Address to send permit _

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN



Bayfield Co. Zoning Dept.

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department

LU 75.00 ATF 75.00 Permit #: Date: Amount Paid: Refund:

DO NOT START CONS	RUCTIO	N UNTIL	ALL PERIVITS F	TAVE BEEN 155UE	D TO APP	PLICANT.			FILL OU	TIN INK (NO I	PENCIL)	
TYPE OF PERMIT F	REQUEST	TED→	A LANI	D USE SA	ANITAR	RY PRIVY	CONDITIO	NAL USE	☐ SPECIAL	USE B.O	Δ Π	OTHER
Owner's Name:					Maili	ing Address:		ity/State/Zip			Telepho	
Ron A	node	450N	3		Pn	30x 132		Hurbs	12 WT	54844	715-3	774-3777
Address of Property	:	201			City/	State/Zip:			Cell Pho	one:		
12325	Hus	. 1	3		P	ort Wing	W					
Contractor:	11 00	· ·	<i>a</i>				Plumber:				Discort	- 51
	5	216	,				ramber.		NA		Plumbe	r Phone:
Authorized Agent: (Person Sign	ning Appli	cation on behal	f of Owner(s))	Agen	nt Phone:	Agent Mailing	Address (inc	lude City/State	/Zip):	Written	Authorization
**									e o o o o o o o o o o o o o o o o o o o		Attache	d
PROJECT					Tax I		± 110			Parardad Dass	☐ Yes	☐ No nowing Ownership)
LOCATION	Legal	Descrip	tion: (Use Ta	ax Statement)		28	158			460	ament: (Sn	387
SE .	SE (S) Gov't Lot Lot(s)					Vol & Page CSN	/I Doc# Lo	ot(s) No.	Block(s) No.	Subdivision:		
5 - 1/4,	SE 1/4, SW 1/4 Gov't Lot Lot(s)							10,1101	Diock(3) No.	Subulvision.		
			-6			Town of:				Lot Size		
Section	, Tow	nship 🙎	N, R	ange <u>8</u>	W	Port	11):			Lot Size	Acrea	14.)
	T						00 103					79.1
	☐ Is P	roperty	/Land withir dward side o	n 300 feet of Riv of Floodplain?		eam (incl. Intermittent)	Distance S	tructure is f	rom Shorelin		Property	Are Wetlands
☐ Shoreland →	4									Zo	odplain ne?	Present?
	LISP	торегц	/ Land Withir	1000 feet of La		nd or Flowage	Distance S	tructure is f	rom Shorelin	e:	Yes	□ Yes
Non-Shoreland						co continue	-			eet	No	<u>₽</u> No
Trion shoreland	1											
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of Completion							Total # o			at Type of		Type of
* include donated time &		Proje	ct	# of Stori	ies	Foundation	on			anitary System	n	Water
material						45000	property		Is on t	he property?		on property
	Nev Nev	v Const	ruction	¥ 1-Story		☐ Basement	□ 1	☐ Mu	nicipal/City			☐ City
5 5000	☐ Add	lition/	Alteration	☐ 1-Story +	Loft	☐ Foundation	7 2			Specify Type:		🏿 Well
\$ 5000		versio	17.	☐ 2-Story		Slab	□ 3		Sanitary (Exists) Specify Type: 37			
		ocate (e	xisting bldg)						☐ Privy (Pit) or ☐ Vaulted (min 200 gallon)			
☐ Run a Business on						Use						
			ness on			Use	□ None					
	Prop	a Busi perty	ness on			Year Round	□ None	☐ Por		vice contract)		
			ness on				□ None	☐ Por	table (w/serv npost Toilet	vice contract)		
Existing Structure	Prop	erty		r is relevant to i	it)	Year Round	□ None	☐ Por	table (w/serv npost Toilet ne	rice contract)		
Existing Structure Proposed Constru	Prop	erty		r is relevant to i	it)	Year Round	None	☐ Por ☐ Cor ☐ Nor	table (w/serv npost Toilet ne	vice contract)	eight:	-
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Proposed Construction Proposed Us Residential Commercial Municipal L I (we) declare that this as (are) responsible for the result of Bayfield County property at any reasonal	Proputation: Use Use Use	mit being a cocuracy of this inform the purpose	Bunkhous Mobile He Addition/ Accessory Condition Other: (ex	Structure (first et i.e. cabin, his with Loft with a Porce with (2 nd) P with a Decl with (2 nd) E with Attack se w/ (sanita ome (manufact / Alteration (exp y Building Additional Use: (explain)	st structunting ch Porch k Deck hed Ga ary, or tured da k polain) dition/. for STAR ten examin ling and the with this a	Proposed Structure on property) shack, etc.) rage sleeping quarters, ate) Alteration (explain Alteration (explain application. I (we) consent to	or cooking or cooking vithout A PER set of my (our) knot Bayfield County ir o county officials	□ Por □ Cor □ Noi Width: Width:	p facilities) ULT IN PENALTI lef it is true, correctether to issue a primistering country.	Dimensio (X (X (X (X (X (X (X (X (X (ns)))))))))))))) 24))) e) acknowled accept liability access to the	Square Footage 384 dge that I (we) am ty which may be a e above described
Proposed Construction Proposed Us Residential Commercial Municipal L I (we) declare that this as (are) responsible for the result of Bayfield County property at any reasonal	Proputation: Use Use Use	mit being a cocuracy of this inform the purpose	Bunkhous Mobile He Addition/ Accessory Condition Other: (ex	Structure (first et i.e. cabin, his with Loft with a Porce with (2 nd) P with a Decl with (2 nd) E with Attack se w/ (sanita ome (manufact / Alteration (exp y Building Additional Use: (explain)	st structunting ch Porch k Deck hed Ga ary, or tured da k polain) dition/. for STAR ten examin ling and the with this a	Proposed Structure on property) shack, etc.) rage sleeping quarters, ate) Alteration (explain	or cooking or cooking vithout A PER set of my (our) knot Bayfield County ir o county officials	□ Por □ Cor □ Noi Width: Width:	p facilities) ULT IN PENALTI lef it is true, correctether to issue a primistering country.	Dimensio (X (X (X (X (X (X (X (X (X (ns)))))))))))))) 24))) e) acknowled accept liability access to the	Square Footage 384

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application) Attach Copy of Tax Statement

ch your Property (regardless of what you are applying for)

Proposed Construction V Location of: w / Indicate:

North (N) on Plot Plan (*) Driveway and (*) Frontage Road (Name Frontage Road)

All Existing Structures on your Property

Show: Show any (*):

now Location of (*):

(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)

(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20%

(7) Show any (*):

See Attached MAP

Please complete (1) - (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Fill Out in Ink - NO PENCII

Description	Measuren	nent	Description	Measur	ement	
Setback from the Centerline of Platted Road	306	Feet	Setback from the Lake (ordinary high-water mark)	NA	Feet	
Setback from the Established Right-of-Way	256	Feet	Setback from the River, Stream, Creek	NA	Feet	
			Setback from the Bank or Bluff	NA	Feet	
Setback from the North Lot Line	250	Feet				
Setback from the South Lot Line	530	Feet	Setback from Wetland	NA	Feet	
Setback from the West Lot Line	1060	Feet	20% Slope Area on the property	☐ Yes	√ No	
Setback from the East Lot Line	215	Feet	Elevation of Floodplain		Feet	
Setback to Septic Tank or Holding Tank	30	Feet	Setback to Well	30	Feet	
Setback to Drain Field	35	Feet				
Setback to Privy (Portable, Composting)	NA	Feet				

Prior to the placement or construction of a structure within ten (10) feet of the minimum re-other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from ne previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

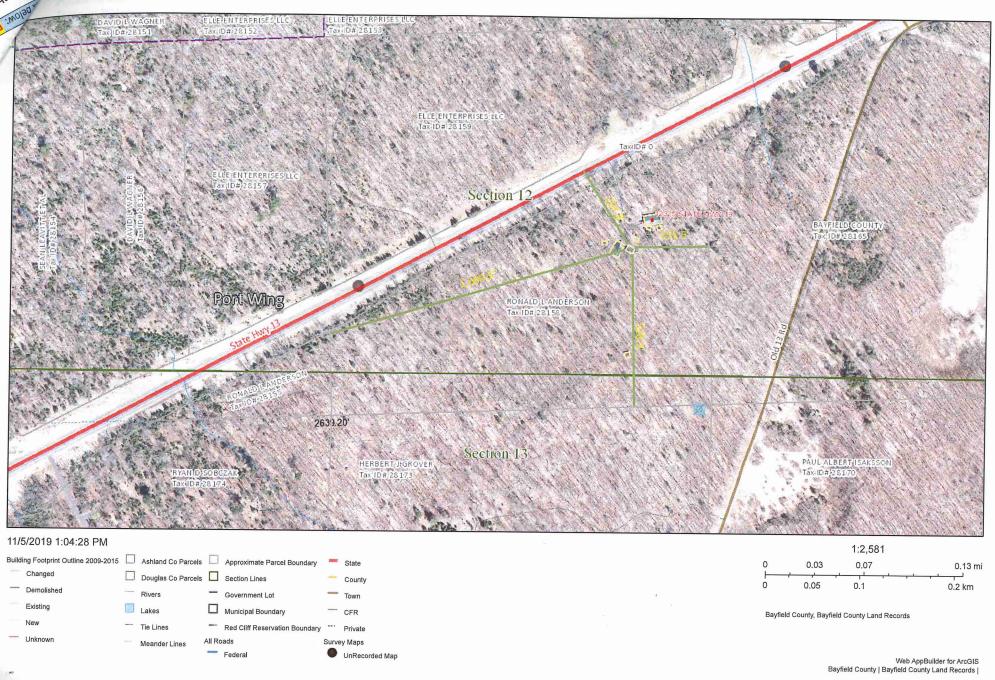
NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	Sanitary Number: 32	7276	# of bedrooms: 3	Sanitary Date: 6/25/1999		
Permit Denied (Date):	Reason for Denial:		and the results of			
Permit #:	Permit Date:					
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming	ous Lot(s)) No	Mitigation Required Mitigation Attached	☐ Yes 🖟 No ☐ Yes 💆 No	Affidavit Required Affidavit Attached Yes No		
Granted by Variance (B.O.A.) ☐ Yes ☑ No Case #:		Previously Granted by Ves No	/ Variance (B.O.A.)	#: NA		
	Existing ATF		es Represented by Owner Was Property Surveyed	☐ Yes ☐ No ☐ Yes ☐ No		
Inspection Record: Existing Structure Lact Permit.	meers Se	House, Af	her the	Zoning District (F)) Lakes Classification ()		
Date of Inspection: 11 15 119		burt Schla		Date of Re-Inspection:		
Condition(s): Town, Committee or Board Conditions Atta				Date of Approval:) 6/2020		
Hold For Sanitary: Hold For TBA:	Hold For Affic	davit: 🗆	Hold For Fees:			

Anderson Shed



After-the-Fact

After-the-Fact

SANITARY
SIGN
SPECIAL
CONDITIONAL
BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	20-0002 Issue	d To: Ronald	Anderson	ıderson					
Location:	SE ¼ of SW ¼ S of Hwy 13	Section 12	Township 50	N.	Range 8	W.	Town of	Port Wing	
Gov't Lot	Lot	Block	Subdivisi	ion			CSM#		

For: Residential Accessory Structure: [1- Story; Shed (16' x 24') = 384 sq. ft.]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Not to be used for human habitation.

or if any prohibitory conditions are violated.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

		Rob Schierman
NOTE:	This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.	Authorized Issuing Official
	Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.	January 7, 2020
	This permit may be void or revoked if any performance conditions are not completed	Date

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: **Bayfield County** Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

Authorized Agent:

Address to send permit_

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received) JAN 06 2020

Amount Paid:

Permit #:

Date:

LU 75.00

ATF 75.00

INSTRUCTIONS: No p Checks are made pay DO NOT START CONS	able to: I	Bayfield (County Zoning	Department.		ayfield Co. Zon	ing Dept.	TF	FILL OU	TININK (NO	PENCII)	
TYPE OF PERMIT F	REQUES	TED-	□ LAN	DUSF SA	NITAR	Y PRIVY	CONDITIONA	N HCF G				
Owner's Name:			La Cartion	D USL JA	AND DESCRIPTION OF	ng Address:		/State/Zip:	SPECIAL	USE B.C	Telephor	OTHER
Rom A	nder	· S A A)			0.							
Address of Property	:	2010			City/	PO Box 132 Harbster WI City/State/Zip:					Cell Phor	
12325	H	7	13								Centino	ie.
Contractor:	1.00		12		Cont	Port Wins WI Contractor Phone: Plumber:					Plumber	DL
	rlf						1	2 (Plumber	Prione:
Authorized Agent: (Person Sig	ning Appl	ication on behal	f of Owner(s))	Agen	t Phone:	Agent Mailing Ad	dress (includ	e City/State	/Zip):	Written	Authorization
											Attached	
PROJECT LOCATION Legal Description: (Use Tax Statement)					Tax I					Recorded Doo	ument: (Sho	owing Ownership)
LOCATION	<u> </u>	Descrip	tion. (ose i	ax statement)		281	58			460		38 子
SE 1/4, S	W	1/4	Gov't Lot	Lot(s)	CSM	Vol & Page C	SM Doc# Lot(s) No. Blo	ock(s) No.	Subdivision:		
SE 1/4, S	Hwy		7									
Section 12	, Tow	nship _	50 N, R	ange 8	W	Town of:	1			Lot Size	Acrea	ge
						Por	+ Win	29			14	· /
	☐ Is	Propert	y/Land withi	n 300 feet of Riv	ver, Stre	eam (incl. Intermittent)	Distance Stru	acture is from	n Shoreline	e: Is your	Property	2 30 B V
☐ Shoreland →	4			of Floodplain?		escontinue	·		1		odplain	Are Wetlands Present?
	☐ Is I	Propert	//Land withi	n 1000 feet of La			Distance Stru	acture is from	n Shoreline		one? Yes	∑ Yes
CV-1					If y	escontinue -	-		1		No	No
Non-Shoreland												
Value at Time	D. College	A RIVE			1975	Grand Color	E 1405000	5365 W.S	0.5.8 V/V.	11-14-22-7-5-14	A CONTRACTOR OF	
of Completion							Total # of bedrooms		Wh	at Type of		Type of
* include donated time &		Proje	ct	# of Stori	ies	Foundation	on			anitary Syste	m	Water
material							property	Is on the property		he property?		property
	Ne Ne	w Cons	truction	№ 1-Story		☐ Basement	□ 1					☐ City
\$ 2				☐ 1-Story +	Loft	☐ Foundation	₽ 2	☐ (New) Sanitary Specify Type:			I Well	
3,000		nversio		☐ 2-Story		⅓ Slab	□ 3	■ Sanitary (Exists) Specify Type:				
□ Relo		elocate (existing bldg)					_) or Uaulted (min 200 galle		
1						And the second second					in 200 gallo	on)
Labor	☐ Rur	n a Busi	ness on			Use	□ None	☐ Portal	ole (w/serv	vice contract)	in 200 gallo	on)
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(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Date

(regardless of what you are applying for)

Fill Out in Ink - NO PENCIL

dicate: how Location of (*):

Proposed Construction North (N) on Plot Plan

(*) Driveway and (*) Frontage Road (Name Frontage Road)

Show: (4) Show: (5)

All Existing Structures on your Property

(6) Show any (*): (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)

(7) Show any (*): (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20%

See Attached Map

Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Measureme	nt		Description	Measurement	
				V .		
Setback from the Centerline of Platted Road	400 630	Feet		Setback from the Lake (ordinary high-water mark)	Α Λ	Feet
Setback from the Established Right-of-Way	580	Feet		Setback from the River, Stream, Creek	A)A	Feet
1 .			60/14	Setback from the Bank or Bluff	10	Feet
Setback from the North Lot Line	580	Feet				
Setback from the South Lot Line	175	Feet		Setback from Wetland	NO	Feet
Setback from the West Lot Line	1010	Feet		20% Slope Area on the property	☐ Yes	₩ No
Setback from the East Lot Line	275	Feet		Elevation of Floodplain	NA	Feet
		- 5-2 NW-1		·	173	
Setback to Septic Tank or Holding Tank	>100	Feet		Setback to Well	7 100	Feet
Setback to Drain Field	>100	Feet				
Setback to Privy (Portable, Composting)	NA	Feet		,		
	eet of the minimum required	setback, t	he bo	oundary line from which the setback must be measured must be visible from o	ne previously surve	ed corner to the

her previously surveyed corner or marked by a licensed surveyor at the owner's expense.

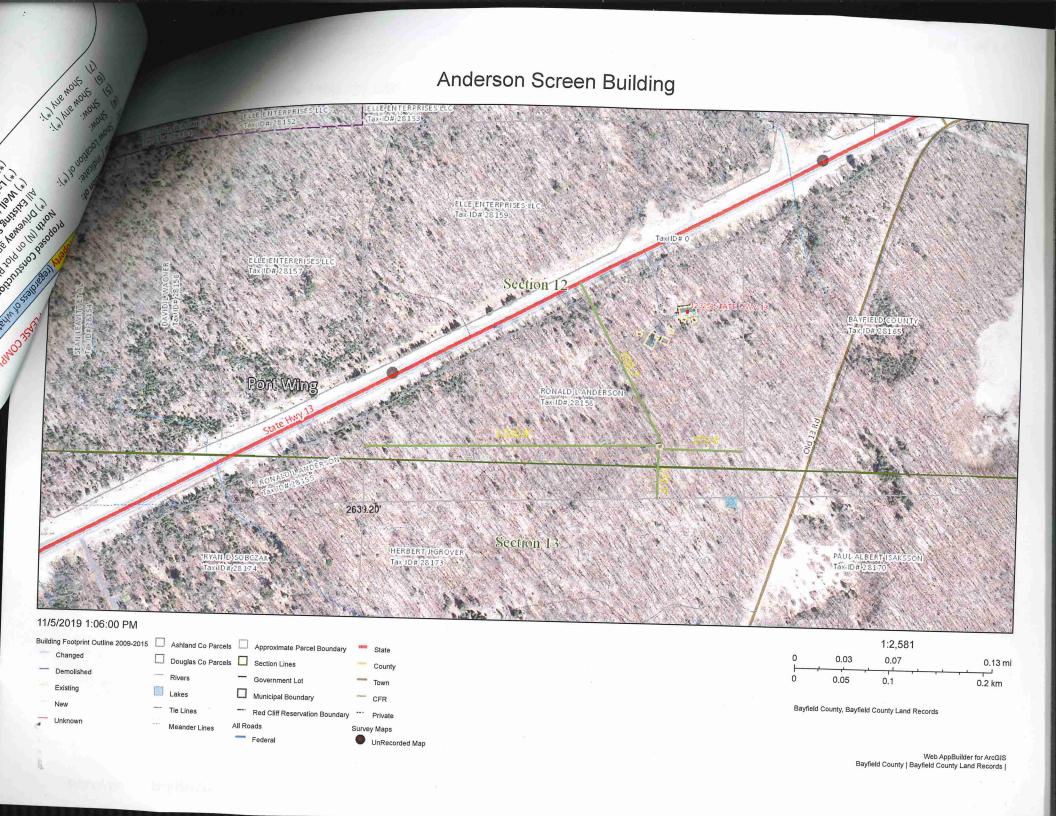
Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible fro one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

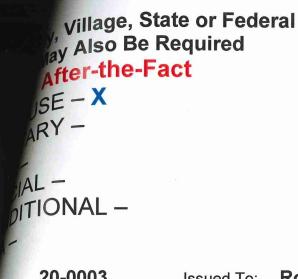
(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	Sanitary Number: 3	27276	# of bedrooms: 3	Sanitary Date: 6/2	5/1999				
Permit Denied (Date):	Reason for Denial:			and the same					
Permit #: 20 -0003	Permit Date: 1-7-	2020	and the second	ALC: N					
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Yes (Deed of Record Yes (Fused/Contigue) Yes Yes	ous Lot(s)) No	Mitigation Required Mitigation Attached	☐ Yes 🕱 No ☐ Yes 📝 No	Affidavit Required Affidavit Attached					
Granted by Variance (B.O.A.) ☐ Yes Y No Case #:		Previously Granted by Yes No		#: NA					
Was Parcel Legally Created Was Proposed Building Site Delineated Was Proposed Building Site Delineated Was Proposed Building Site Delineated	ZK'STINS ATE	Were Property Lines Represented by Owner Was Property Surveyed □ Yes □ N							
Inspection Record: Existing Structure Ford Permit.	we meeds	Setbacks. 1	FI)						
Date of Inspection: 11 15 19	Inspected by:		t Schierman	Date of Re-Inspection:					
Condition(s): Town, Committee or Board Conditions Attached? Yes No - (If No they need to be attached.) Not to be used for human hab : tections. Signature of Inspector: Date of Approval: 16, 2020									
Hold For Sanitary: Hold For TBA:	Hold For Affic	davit: 🗆	Hold For Fees:		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				





BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

20-0003 Issued To: Ronald Anderson

SE ¼ of SW ¼ Section 12 Township 50 N. Range 8 W. Town of Port Wing S of Hwy 13

Lot Lot Block Subdivision CSM#

Residential Accessory Structure: [1- Story; Screen Building (16' x 16') = 256 sq. ft.]

sclaimer): Any future expansions or development would require additional permitting.

Ondition(s): Not to be used for human habitation.

mate responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or medication of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

Rob Schierman

Authorized Issuing Official

January 7, 2020

Date